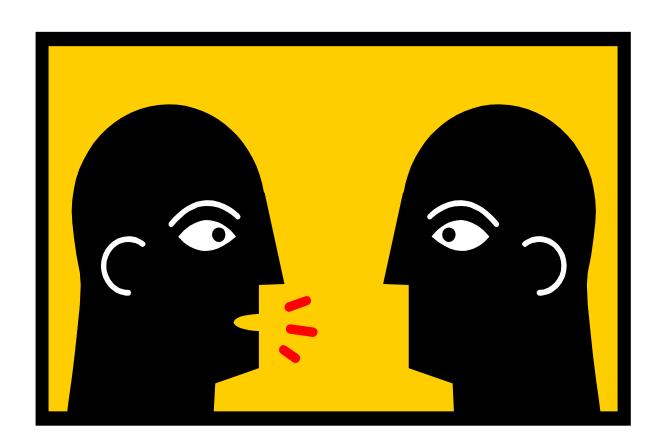
An Introductory Guide to Communicative Support



This guide was designed as a supplement to the training you will receive as part of the 2005 The Year of Unlocking Voices Project. It is not all inclusive, and sections are subject to change.

INTRODUCTION/PREFACE

The right to communicate is both a basic human right and the means by which all other rights are realized. All people communicate. In the name of fully realizing the guarantee of individual rights, we must ensure:



- that all people have a means of communication which allows their fullest participation in the wider world;
- that people can communicate using their chosen method; and,
- that their communication is heeded by others.



Where people lack an adequate communication system, they deserve to have others try with them to discover and secure an



appropriate system. No person should have this right denied because they have been diagnosed as having a particular disability. Access to effective means of communication is a free speech issue.



Communicate: Taking a Chance

"Sometimes, taking the time to listen can be helpful and worthwhile. You may never know what you missed out on from some amazing people you might otherwise dismiss because you are afraid to take a chance."

> Brenda Hoffart's speech Governor's proclamation The Year of Unlocking Voices December 15, 2004

CHAPTER ONE

If we recognize communication as one of the building blocks of personal freedom, then we must champion the cause of communication for everyone - those with and those without disabilities.

The intent of this resource guide is to provide some very basic information related to the skill of communicating, to help outline what communication is and how it can be enhanced as well as (hopefully) provide a springboard of ideas for those who work in the Developmental Disabilities field. For to help someone unlock their voice is one of the greatest thrills a human being can experience. To support someone as they test their new skills, expand their horizons and take charge of their life; can have a profound effect on our life as well.

Together in partnership - those with and those without disabilities, we can change lives: ONE VOICE AT A TIME!

GETTING STARTED – many of us think that communicating is easy...I mean...it's just talking isn't it? Truthfully, the process of communicating is much more than just talking or just listening.

Some basic definitions might be helpful!

- **Communicate**: to convey information about, make known, impart; to reveal clearly; manifest; to have an interchange as of ideas. To express oneself in such a way that one is readily and clearly understood.
- **Communication**: the exchange of thoughts, messages, or information, as by speech, signals, writing or behavior. Interpersonal rapport
- **Listen**: to make an effort to hear something; to pay attention; heed.

Voice: (noun) the sound produced by the vocal organs of a vertebrate, especially a human. The ability to produce such sounds. Expression, utterance; a medium of agency of expression, the right or opportunity to express a choice or opinion.

- **Verbal**: of or relating to, or associated with spoken words
- **Non-Verbal**: being other than verbal (including facial expression, sign language, gesturing, use of the written word etc.)
- **Feedback**: The return of information about the result of a communication process. The purpose is to clarify the information sent and provide an evaluative response.
- Some words are often mistakenly considered to have the same meaning. "Speech" and "language" are two of these words.

Speech is the actual vocal production of words and phrases/sentences.

Language is the accepted, structured and symbolic system for interpersonal communication composed of sounds arranged in ordered sequence to form words, with rules for combining these words into sequences or strings that express thoughts, intentions, experiences, and feelings (whew). *In other words, language is the rule system that tells us how to put words together.*

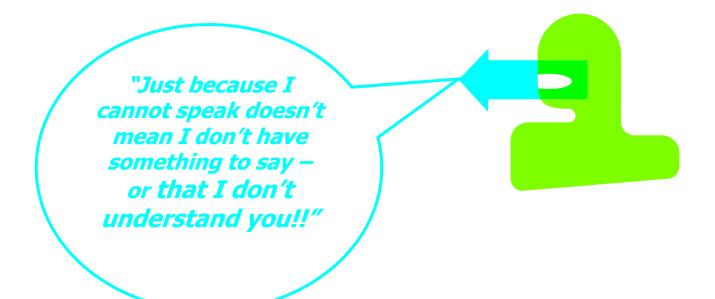
 $\mathfrak P$ Language can have receptive and expressive forms.

Receptive language is the translation of sound patterns into their intended meaning, or, words that a person understands; may be verbal or visual. Receptive language refers to the understanding of what is being said or read.

Expressive language is the use of conventional symbols (words or pictures) to communicate perceptions, ideas, feelings, or intentions to others. Expressive language refers to the ability to say, or write, or draw, or in some other fashion, let people know what is on our mind.

Receptive and **expressive** language skills are used by people who are verbal and also by people who use non-traditional communication methods (sign language or manual communication, communication boards, electronic devices, computer assisted devices – these terms will be defined later on in this document).

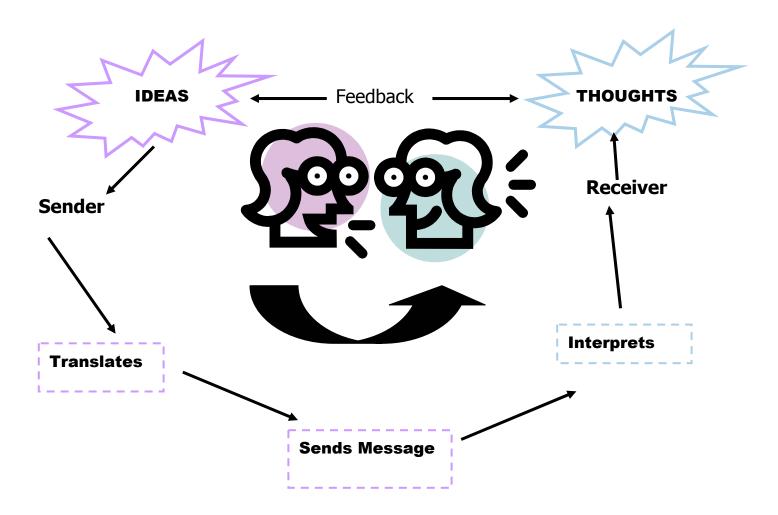
Please, never think that a person who does not speak, also <u>does not</u> <u>understand what is being said</u>. It is simply not true. It is an easy mistake to make, and one that can prevent new relationships from forming and damage relationships that already exist.



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The Communication Process:

The act of communication is really a process or a cycle. As the sender, we have an idea or information that we would like to share with others. We internally translate our message into words, symbols and gestures that hopefully will be understood by our receiver. We send the message and wait for feedback to know if the receiver heard us. The receiver must interpret the message and make it meaningful for them and then provide us with feedback. A good rule of thumb is to remember that communication is the MESSAGE RECEIVED not necessarily the message sent! As communicators it is up to us to make sure that the message we intended to send is indeed the message that was received.



CHAPTER TWO

ON BEING A GOOD LISTENER -

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Just listen to people. You don't have to agree. You just have to listen, then help people act upon their choices.

<u>Listening</u>: the reception and utilization of information transmitted via acoustic events; influenced by numerous factors, such as motivation, length of presentation of information, relevance of information, distracting influences and psychological integrity of the listener, or, hearing with thoughtful attention.

Active listening is giving our full attention to the person with whom we are interacting. Active listening is done mainly through hearing what the other person has to say. Active listening can also be done visually, by watching and observing non-verbal signals such as body language or body positioning, and/or facial expressions.

People will have their wants and needs and requests addressed in a quick and respectful manner when we are active listeners. People will know that we are interested in them personally, and want to see them succeed. People will begin to, or even strengthen, their trust in us.

As an active listener, we will have someone interested in us, someone more willing to work with us because they know we care about them. An active listener is a key to a successful relationship—everyone is a winner!

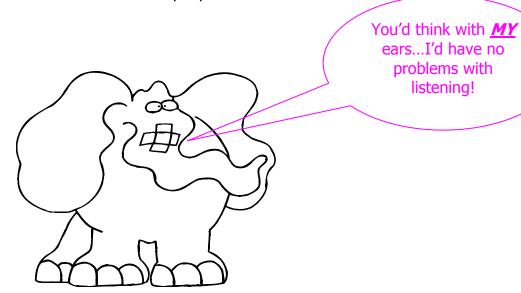


Success in life can be directly related to the ability to communicate. Full interpersonal communication substantially enhances an individual's potential for education, employment, and independence. American Speech-Language-Hearing Association (ASHA), 1997-2004.

Listening:

Real listening is based on the intention to do one of four things: (a) understand someone, (b) enjoy someone, (c) learn something, (d) give help or solace

- There are many ways in which we consciously or unconsciously block our ability to listen. Here is a partial list with a short explanation:
 - <u>Comparing</u>: makes it hard to listen because we are comparing our own experiences to what the speaker is saying.
 - <u>Mind reading</u>: causes us to distrust what the speaker is saying and try to figure out or guess what they REALLY mean.
 - Rehearsing: we don't listen because we are planning what we are going to say!
 - <u>Filtering</u>: we listen to parts of the message, not the whole message.
 - <u>Judging</u>: we let something other than the message influence what we think of the sender usually it's something negative about the speaker that we don't like so we "write off" their message.
 - <u>Dreaming</u>: as we're listening something triggers a private moment within and we're off down memory lane instead of listening.
 - <u>Identifying</u>: we take everything the person is telling us and refer it back to our own experiences, which stops us from listening.
 - <u>Advising</u>: We are so busy trying to think how to help the speaker that we fail to listen to the entire message.
 - <u>Sparring</u>: We argue and debate with people and are so quick to disagree that we don't listen well.
 - <u>Being right</u>: in this situation, we don't listen to anyone because we are always right.
 - <u>Derailing</u>: we suddenly change the subject to avoid having to hear more.
 - <u>Placating</u>: we want to be nice so we half-listen and we agree with EVERYTHING we hear – so people will like us!



- 1. <u>Active Listening</u>: Listening is an active process that requires our participation, the give and take that is part of a conversation. Here are ways to **listen actively:**
 - **Paraphrasing:** means to state in our own words what we think someone just said. Paraphrasing is absolutely necessary to good listening. Some examples are "what I hear you saying is...In other words...So basically how you felt was...Let me understand, what was going on for you was...What happened was...Do you mean...?" We'll reap the following rewards when we use paraphrasing:
 - a. people deeply appreciate feeling heard
 - b. paraphrasing stops escalating anger and cools down crisis
 - c. paraphrasing stops miscommunication. False assumptions, errors, and misinterpretations are corrected on the spot
 - d. paraphrasing helps us remember what was said
 - e. when we paraphrase we'll find it much harder to participate in these listening blocks
 - Clarifying: ask questions until we get more of the picture, more background, what were the circumstances. It helps us sharpen our listening focus so that we hear more than vague generalities and lets the other person know we're interested in what they are saying.



- Feedback: in a nonjudgmental way, share what we thought, felt or sensed, check our perceptions. Did we read the body language correctly? The intonations? Feedback also helps the other person understand the effect of their communication, its provides a chance to correct errors and miscommunications. There are three important rules for giving feedback:
 - a. immediate: as soon as we fully understand the communication
 - b. honest: means our real reaction
 - c. supportive: try not to cause the person to feel defensive or attacked
- 2. <u>Listening With Empathy</u>. There is only one requirement for listening with empathy: simply know that EVERYONE IS TRYING TO SURVIVE. We don't have to like everyone or agree with him or her, but recognize we are more alike than we may think. Listening with empathy means saying to ourselves, "This is hard to hear, but it's another human being trying to get by".



- 3. <u>Listening With Openness</u>: It's difficult to listen when we're judging and finding fault, we listen selectively, filter out what we don't want to hear. Listening selectively, screening out that which does not agree with our worldview protects us from being WRONG. For many of us, our self-image is closely tied to our beliefs and opinions.
- 4. <u>Listening with Awareness</u>: There are two components to listening with awareness. (1) to compare what's being said to our own knowledge of history, people, and the way things are without judgement. (2) to hear and observe for consistency. Does the person's tone of voice, emphasis, facial expression and posture fit with the content of their communication? If we sense inconsistencies we should use feedback to check our perceptions. A cautionary note: sometimes a person's physical disability will interfere with their ability to use these communication qualities and that may lead us to a misperception that doesn't truly exist i.e., an individual with Cerebral Palsy may not have the facial expressions that are consistent with the message they are delivering. Using good feedback skills could prevent this misperception from happening.







- Some "signs" that you are an active listener:
 - Good eye contact, <u>matching our eye level to their eye level</u> i.e., persons in a wheelchair
 - Lean slightly forward
 - Reinforce the speaker by nodding or paraphrasing **DO NOT** remain totally silent
 - Clarify by asking questions
 - Give the speaker time to state their entire message
 - Actively move away from distractions
 - Be committed, even if we're angry or upset, to understanding what was said



CHAPTER THREE

VERBAL COMMUNICATION

- $\ensuremath{\mathfrak{D}}$ To express one's thoughts, moods, or feelings through spoken words.
 - Verbal communication is the most commonly accepted communication method. Verbal communication is quick, spontaneous, colorful, easily understood by both familiar and unfamiliar listeners, and most often results in an immediate response. No special equipment is needed, so people can interact with others anywhere and everywhere with very little effort. Words are fairly easy to interpret and understand as the meaning stays relatively constant throughout most physical environments.
 - Verbal communication can be expanded through the introduction of new words (vocabulary) and new experiences.
 - An interesting factoid: Normal speech rate is somewhere between 150 and 185 words per minute with 200 being the high end of the scale. Research shows that our brains process information at a much higher rate than that up to 650 words per minute. This gap between our ability to process speech and the speaker's speech rate may contribute to the idea that we can multi-task when we are listening!
- Refer for evaluation if we notice changes in:
 - 1. Reduced ability to express basic needs to others using words or gestures
 - 2. Reduced social communication skills

CHAPTER FOUR

NON-VERBAL COMMUNICATION

Communication is freeing the voice inside. Judie Braun

Nonverbal: without oral language. To express one's thoughts, moods, or feelings through avenues that do not include the spoken word. This includes, but is not limited to, body language, facial expressions, body stance and body positioning.

For people who speak, the addition of non-verbal cues enhances the overall message. Angry words accompanied by tightly clenched shaking fists and tight body posture sends a different message than do angry words alone. The combination of words and nonverbal cues is often taken more seriously than words alone, and the dual message is responded to more quickly.

Many people who don't speak verbally rely on a nonverbal communication style to share information. Whereas words tend to have common, shared meanings, nonverbal messages can often be misunderstood because each person uses a <u>unique</u> way of sending their messages - there is no universal meaning for the non-verbal communication. Because of their unique styles, nonverbal message givers tend to communicate more with familiar people than with casual acquaintances so that their messages have a better chance of being understood and acted upon. A key to more effective communication with a nonverbal message user <u>is the development of a trusting personal relationship</u>.

Confusion exists when verbal words and nonverbal cues do not match. A person with a scowl on her face tells us that we look nice in our new outfit. Do we believe her? Probably not, because her facial expression does not match her words. In general, when words and body cues don't match, people tend to take the body cues as the true message. To avoid misunderstandings, we need to remember to keep our body language consistent with the message we want to convey.

NONVERBAL COMMUNICATION includes facial expressions, tones of voice, gestures, eye contact, spatial arrangements, proximity, paralinguistics, and patterns of touch, expressive movement, cultural differences, and other "nonverbal" acts. Research suggests that nonverbal communication is more important in understanding human behavior than words alone--the nonverbal "channels" seem to be more powerful than what people say.

Paralinguistics:

This facet of nonverbal communication includes such vocal elements as:

- **Tone**: the characteristic quality of timbre of a particular voice
- **<u>Pitch</u>**: the relative position of a tone within a range usually referred to as low pitched or high pitched voices
- **Rhythm**: a pattern or flow of speech
- **<u>Timbre</u>**: The combination of qualities of a sound that distinguishes it from other sounds of the same pitch and volume.
- **Volume**: The amplitude or loudness of a sound.
- **Inflection**: Alteration in pitch or tone of the voice
- **Rate**: the speed with which words are spoken

All of these can have a positive or negative impact on how our verbal messages are received! If our pitch is high and the individual we are communicating with has a high end hearing loss – they simply won't hear us; if our rate is too fast, people may not be able to process our speech; if the volume is too low they might not hear us. It is important to closely monitor the qualities of our speech to improve our communications.

Nonverbal communication consists of several codes working in concert.

- A. Body movement and gesture, also called Kinetics, are important sources of information.
 - Emblems (an **object** or a representation **that functions as a symbol**) act like words, they have direct verbal translations.
 - Illustrators are **gestures** that accompany speech and add meaning to it.
 - Regulators maintain the back and forth flow of talk in an interaction by acting as social traffic signals.
 - Affect displays convey emotional meaning.
 - a. Posture and gesture often tell us how a person feels however we must remember to account for any physical disability that might alter their ability to use posture and gestures.
 - b. To check for accuracy, look for verbal and nonverbal inconsistencies.
 - Adaptors are **unnoticed gestures** or movement we use to calm ourselves in moments of stress like foot tapping or body rocking.

14

- B. Facial displays, including eye movement, are also part of nonverbal communication.
 - 1. The face is a powerful source of nonverbal information.
 - Facial displays are partly natural and partly learned.
 - People learn to use facial expressions to intensify or minimize feelings and to neutralize or mask other emotions.
 - We follow cultural, professional, and personal display rules as we learn to manage our faces.
 - When working with persons with disabilities, facial displays may be limited or not under the control of the individual
 - 2. The eyes, are important sources of information.
 - The eyes are good indicators of emotion.
 - Eye contact signals our willingness to relate to one another.
 - Eye behavior is associated (often falsely) with character traits.
- C. Paralanguage, the <u>way</u> we say something rather than what we say, is another nonverbal code.
 - 1. Paralanguage is usually divided into three parts, each of which convey meaning.
 - Vocal qualities are characteristics of the voice like pitch.
 - Vocalizations are special sounds like groans or sighs.
 - Vocal segregates are pauses, fillers, and other hesitation phenomena.
 - 2. Although the judgments we make on the basis of voice are not necessarily accurate, we think they are. Silence is an overlooked aspect of paralanguage that carries meaning.
- D. Time and space also convey messages.
- 1. The values we attach to and the way we use time provide useful information about us.
 - People have different psychological orientations to the present and the future.
 - People are also controlled by biological clocks.
 - Cultures also differ in the meanings they attach to time.
- 2. The way we use space is called proxemics.
 - Each of us varies in our attitudes about "personal space" i.e., how close we prefer to be to other people/them to us.
 - The extreme of personal closeness is touch.
 - All cultures regulate and forbid certain kinds of touch.
 - Touch defines relationships, communicates social status, and satisfies emotional needs.



- E. Physical appearance and object language are two final nonverbal codes.
- 1. All cultures favor certain body types and create stereotypes about the characteristics attached to them.
 - North American cultural norms value men who are muscular and women who are slender.
 - Dress fulfills several functions: comfort, protection, modesty, and cultural display
 - The objects or artifacts we display also send messages.
 - Our possessions are closely linked with our sense of self. Elements in the design of built environments give off additional messages. Size, shape, texture, linear perspective, lighting, color, temperature, noise, and sensory stimulation are important environmental factors







CHAPTER FIVE

BEHAVIOR IS ONE WAY TO COMMUNICATE.....



At its simplest level, all behavior is communication. It is what people do to get what they want or need, or to get away from something, someone or some place they do not want. People do not engage in problem behaviors because they have developmental or other cognitive disabilities. They engage in behaviors that have worked for them — that get them what they NEED.

People do not 'have' behaviors; rather, they USE behavior for very specific reasons. Whenever people use behavior, they are communicating how they are feeling or what they are thinking.

Excerpt from TheArcLink.org
Thursday, August 14, 2003

All behavior has a communicative purpose. Behaviors don't happen without reason and behaviors don't happen just to make us mad. Behaviors are communication strategies that people use to express their wants, needs and feelings, and to get their needs met. It becomes our job, to be detectives and try to figure out WHAT the person's behavior is communicating, or saying to us. WHY is the person behaving that way?

One of the tools that many people have found helpful is something called a "communication diary". These can be simple or complex depending on the person it is designed to support. They can be developed over a relatively short period of time to start out – and can be added to as more information about the person is gained. Start by interviewing the person themselves, the staff, family and friends who know the person best. Make a list of the "behaviors" that the person uses to communicate how they are feeling – get agreement so that everyone understands what each behavior means. We may need to describe how the behavior is performed so that everyone "reads" the behavior the same way. Below are a couple of examples:

Espen's Communication Dictionary

Behavior Communication Chart for Espen

When Espen	It may mean
Whines ("mmmmmm")	"Don't interrupt me; I'm watching the game"
	or- "I don't want to do that now"
Slaps his leg, louder whining ("mmmmm")	"You're not listening to me!" "I don't want to do that right now!"
Bites his hand; screams	"You're still not listening to me!" "Get out my way; now you're really bothering me!"
Bites hand harder, screams louder Chases staff from room.	"You're making me mad!" "Why aren't you respecting me?"

Another example:

When Espen	It may mean	What we should do
Slaps his hand against his leg or thigh	No Not right now I don't want to do this	Acknowledge him by saying "Espen, I know you don't want to do this now, but we need to get it done today." Give him a few alternate times when he can finish the activity.
	Or it may mean: He is watching TV now or His favorite TV show is on	Acknowledge him by saying "I know you're watching TV now. Would you like to finish watching this show and then do this?"
Bites his hand gently	He is getting frustrated or worried and anxious"	Ask him to relax and take a deep breath. Ask him to show you what he wants, or give him a short break.
Bites his hand hard Screams	"I am getting frustrated" or "You're not listening to me!"	Ask him to relax; ask him to show you what he wants. Give him some space if possible.

We need to remember that when anyone is angry or upset **their ability to communicate with or listen to someone else is significantly reduced**! It will probably only make the situation worse if we continue to try to talk "at" them. We may need to step back a bit and let them (and ourselves) cool down before trying to address the issue that triggered the strong emotion again. In fact, if someone has just communicated their feelings to us in a manner that does not fit our expectations, it is important to evaluate how that person is feeling and how we are reacting to what they are conveying to us.



We should also remember that many persons with disabilities have been told "No", "Stop", "You can't" or "You have to" and other such phrases so many times that these <u>words</u> themselves can trigger responses that may look and sound like anger. As sensitive communication allies, we need to monitor our language carefully and recognize when the best thing to say is nothing at all! Use the quiet time to look for alternatives and then, when everyone is calmer, talk about the alternatives and work together with the individual to resolve the situation.

CHAPTER SIX

AUGMENTATIVE AND ALTERNATIVE COMMUNICATION (AAC)

- Total functional communication system of a person which includes:
 - 1. a communicative technique, a symbol set or system,
 - 2. some type of communication/interaction behavior. Used by people who speak and those who do not.
- There are as many different kinds of augmentative and alternative communication forms as there are people because each is specific to the person using it. While some AAC systems are more easily understood by the listener (e.g., body language), other systems can be more complex and can require additional instruction for both user and listener (e.g., **VOCA** = **V**oice **O**utput **C**ommunication **A**id).

Examples of AAC techniques include but are not limited to:

- Communication aids such as:
 - a. Charts
 - b. Bracelets
 - c. Eye gaze boards,
 - d. Picture wallets,
 - e. Electronic communication devices,
 - f. Computers.
- Items on these devices may be indicated by pictures, drawings, letters, special symbols or any combination that works for the person using the aid.





To determine the most appropriate form of augmented communication for an individual, a referral to a licensed Speech-Language Pathologist for evaluation of communication skills and possible use of AAC is needed. The Speech-Language Pathologist will evaluate overall communication skill development, with recommendations as to next steps to pursue to enhance communication efforts.

It is not unusual for both user and listener to be frustrated at times when using augmented communication. Picture wallets can easily be lost, and remembering to plug in electronic devices can be overlooked at the end of a busy day.

When an augmented device is not available, for whatever reason, the person has lost their "voice" and is no longer an effective communicator.

- **Augmentative/Alternative Communication (AAC)**: Any mode of communication other than speech.
- Manual Board/Display/System: An augmentative communication system
 which features no electronic component and is accessed through direct selection
 by the user or a facilitator. The manual system includes a representational
 system which may or may not be standardized. Examples: "Pointing", picture,
 word and object boards; eye-gaze panels, and partner assisted scanning
 displays.
- **Representational System**: The representational system is the KIND of symbol used to represent the vocabulary choices on the manual display.
- **Symbol**: A sensory image that suggests or stands for something else. The word "truck" is a written and, when spoken, auditory/verbal symbol for an actual truck. In order for a symbol to be effectively used for communication purposes, the symbol must be mutually agreed upon by the message sender and message receiver.







POSSIBLE COMMUNICATION INDICATORS

Individual's present means of communication:

	Currently Uses	Unsuccessfully Attempted	Not Attempted	Comments
Changes in breathing patterns				
Eye-gaze/eye movement				
Body position changes				
Facial expressions				
Gestures				
Pointing				
Sign Language				
# of signs comprehended				
# of signs used				
Reliable "yes"				
Reliable "no"				
Vocalizations List:				
Vowels, vowel combinations List:				
Single Words List:				
Approximate number of 2 word utterances				
Approximate number of 3 word utterances				
Semi- intelligible speech				

	Currently Uses	Unsuccessfully Attempted	Not Attempted	Comments
Communication				
Board				
# of objects				
# of pictures				
# of words				
Pictures/words				
combined				
Photographs				
Phrases/Sentences				
Voice output AT				
Device				
Intelligible speech				
Writing				

	Always	Frequently	Occasionally	Seldom	Never
Turns toward speaker					
Makes eye contact					
fleeting					
Makes eye contact					
sustained					
Aware of listener's					
attention					
Attempts to gain					
listener's attention					
Responds to greeting					
Initiate greeting					
Responds to other					
communication interaction					
Initiates communicative					
interactions					
Makes requests					
Indicates refusal					

	Always	Frequently	Occasionally	Seldom	Never
Offers comments					
Interacts with peers					
Interacts with staff					
Desires to communicate					
Understands cause/effect relationship					

How does the individual make requests?
Head nodSign LanguageGestureCommunication board
VerbalizationWord approximationEye gazeInconsistent response
Has a vision evaluation been conducted? Yes No Is a referral needed?Yes No
Has an occupational therapy evaluation been conducted?Yes No Is a referral needed?Yes No
Has an Audiological evaluation been conducted?Yes No Is a referral needed?YesNo

No-Tech Strategies

- Gestures and pointing
- Talk slowly
- Exaggerate your movements

Low-Tech Strategies

- Manual Communication boards
- Eye gaze boards
- On alphabet boards

High-Tech Strategies

- Computers
- Dedicated AAC Devices



No Tech/Low Tech is the use of natural communication. These strategies include gesturing, eye gaze, and sign language. This communication is usually specific to the individual and may require a familiar person such as a caregiver to "interpret" what is being communicated. Working closely with a speech-language pathologist can help caregivers identify what methods the individual is currently using and/or can be enhanced. Low Tech approaches primarily use *external materials* such as pointing to pictures etc.



High Tech is the use of sophisticated computer-based devices that have a variety of capabilities. They typically use synthesized speech (computer generated) and have an extensive amount of memory. They can also be used to draw and can be programmed to control things in the environment such as turning on the TV, the lights, or access the computer.

CHAPTER SEVEN

HAVE YOU HAD YOUR HEARING CHECKED LATELY?



Hearing: the sense, receptive in nature, through which spoken language is received.

Listening: to pay attention to sound, to hear something with thoughtful attention, to give consideration.

Hearing aid: any electronic amplifying device whose function is to bring sound more effectively into the listener's ear; consists of a microphone, amplifier, and receiver; may be worn behind the ear, in the ear, or on the body.

The ability to hear is an essential part of the communication process. Hearing is the 'alert system' that tells us of an incoming message. If the ability to hear is impeded, messages can be unclear or can be missed entirely.

Hearing loss can have many different causes. Some hearing loss can be temporary, and can be treated with medical management. Some hearing loss is permanent, and the person may be a candidate to try a hearing aid. Some hearing loss is a combination of both.

Someone with a middle ear infection can have changing hearing abilities. During an active ear infection, people may not respond as quickly as they usually do, and sounds like the TV or radio may need to be louder than usual. They may seem preoccupied or inattentive. Other signs of ear infection can include:

- hitting the ear(s)
- shaking the head
- preferring to lie on one side (to reduce feeling of pressure in the opposite ear)
- being "out of sorts" in general



Fever and pain can often associated with an active ear infection. Drainage and/or liquid or pus type material also indicates a possible ear infection. Head colds or upper respiratory infections or sinus infections often lead into middle ear infections. Any time a middle ear infection is suspected, a trip to the physician or other medical personnel is needed.

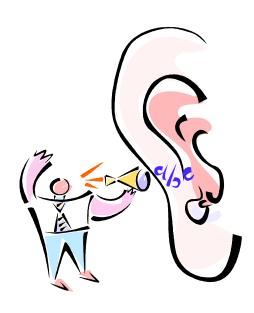
A licensed Audiologist conducts hearing evaluations to determine the nature and degree of hearing loss, provides counseling regarding hearing loss, and gives recommendations as to rehabilitation activities for the person with hearing loss such as (e.g., type and kind of hearing aids).



Hearing aids are ordered by the audiologist and fabricated to meet the needs of the person for whom it was ordered and their specific hearing loss. The type of hearing aid that is chosen depends on the degree of the person's hearing loss. Not all hearing aids provide the same amount of amplification, or would be suitable for any degree of hearing loss. The earmold or piece that fits into the outer ear is custom fit for the user's ear only.

Assistive listening devices (ALD) may be recommended by the audiologist to increase the person's independence and safety at home, work, or at play. They may assist the person by increasing the loudness of the sound, or by attracting the person's attention in some manner. Some examples of ALDs include:

- an alerting system for the telephone
- smoke detector, or doorbell
- an alarm clock that vibrates the mattress of the bed, or causes a bright light to flash
- a system that amplifies the television for the person with the hearing loss but allows those with normal hearing to enjoy the volume at a comfortable level
- Some theatres are equipped with ALDs or provide captioning of the movie
- Some ALDs are used in conjunction with the person's personal hearing aid.



CHAPTER EIGHT

WANT MORE INFORMATION?

HOW DO I FIND SOMEONE TO DO AN EVALUATION?

A current listing of Medicaid approved Audiology and/or Speech-Language Pathology in-patient and out patient sites, as well as approved licensed service providers, can be found by contacting Nebraska HHSS Finance and Support, Medicaid Division, at (402) 471-9147.

Note: Remember > Websites change often, we cannot guarantee that these will remain active



AUGMENTED COMMUNICATION WEBSITES:

• http://www.asha.org American Speech and Hearing Association

HEARING RELATED WEBSITES:

- http://www.personal.umich.edu/~mshlafer/hearing4.html Hearing loss and hearing aids with links to web resources
- http://www.healthyhearing.com/healthyhearing/newroot/relatedlinks/index.asp
 A list of links and resources
- http://medlineplus.gov National Institute of Health
- http://simplifiedsigns.org/ A 'simplified sign system for hearing, but non-speaking persons and their caregivers"
- https://www.techconnectors.net/welcome/aspx "Recycling Technology to benefit Nebraskans with Disabilities"
- http://www.tr.wou.edu/dblink Links to information regarding persons who are deaf/blind
- <a href="http://www.nidcd.nih.gov/health/education/video/travel-vid1.asp#travel-video-travel-vid1.asp#travel-video-travel-vid1.asp#travel-video-travel-vid1.asp#travel-video-travel-vid1.asp#travel-video-travel-vid1.asp#travel-video-travel-video-travel-vid1.asp#travel-video-travel-video-travel-vid1.asp#travel-video-travel-video-travel-vid1.asp#travel-video-travel-video
- http://www.augie.edu/perry/ear/ear.htm Virtual tour of the ear
- http://www.wchh.com/ World Council on Hearing Health
- http://nihseniorhealth.gov/hearingloss/hearintglossdefined/01.html A quiz to understand the facts of hearing loss
- http://www.audiology.org/consumer/quides/clear.php

- http://audiologyawareness.com/hhelp.talktips.htm
- http://audiologyawareness.com/hhelp/untreated.htm
- http://gohear.org/tech/hear.html A written spelling test showing what different levels of hearing loss might hear.

MISCELLANEOUS COMMUNICATION RELATED WEBSITES:

- http://www.breaking-the-barriers.org/adds.htm
- http://www.nadsp.org/library/codetext.html
- http://www.ncil.org/
- http://www.asha.org/NJC/bill of rights.htm
- http://www.tash.org/
- http://www.queendom.com/tests/relationships/communication-skills-raccess.
 html
- http://www.coopcomm.org/workbook.htm
- www.collaborative.org then type "Top Ten Tips" in the search engine window, then click on "Assistive Technology/Augmentative Communication", then click on "Top Ten Tips" PDF/Adobe format (you must have Adobe reader installed on your computer for this to open. If you do not, there are ways to download and install Adobe Reader for free simply visit their website)
- www.ne.easterseals.com then click on Services, then scroll down to and click on The Alternative Support Services, it opens up Alternative Financing Loan Programs which has two initiatives: Nebraska Alternative Financing Program and Nebraska Telework Loan Program

MISCELLANEOUS DEVELOPMENTAL DISABILITIES WEBSITES:

- http://www.ancor.org/2004/
- http://www.aamr.org/
- http://www.aucd.org/
- http://www.nacdd.org/
- http://www.nadsp.org/
- http://www.napas.org/
- http://www.sabeusa.org/
- http://www.thearc.org/
- http://www.nasddds.org/index.shtml
- http://www.thecouncil.org/
- www.valuingpeople.gov.uk/pcpresources.htm

REFERENCES:

Nicolosi, L., Harryman, E., Kresheck, J. (1993). Terminology of Communication Disorders, Second Edition. Baltimore, MD: Williams & Wilkins.

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